

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION
English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled.

DEVICE FOR DISPENSING A THERAPEUTIC OR COSMETIC SUBSTANCE, THE INERT VEHICLE OF WHICH IS A VOLATILE POLYDIORGANOSILOXANE, AND COMPOSITION INTENDED TO BE USED IN THE DEVICE

the specification of which (check one of the following)

is attached; was filed on August 16, 1994 as Application Serial No. 08/291,434 and was amended on _____
 was filed as PCT International Application No. _____ on _____ and was amended under PCT Article 19 on _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) Priority claimed

93 10075	FRANCE	18 August 1993	X <input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, § 120 of any United application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application;

(Specification Serial No.) (Filing Date) (Status)
(patented, pending, abandoned)

(Application Serial No.) (Filing Date) (Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (*list name and registration number*)

HAROLD C. WEGNER Registration No. 25,258	HERBERT I. CANTOR Registration No. 24,392	HELMUTH A. WEGNER Registration No. 17,033
FRANKLIN D. WOLFFE Registration No. 19,724	DOUGLAS P. MUELLER Registration No. 30,300	WILLIAM A. PLAYER Registration No. 31,409

Send correspondence to: WEGNER, CANTOR, MUELLER & PLAYER
P.O. BOX 18218
WASHINGTON, D.C. 20036-8218

Direct Telephone Calls to: (name and telephone number) (202) 887-0400

1-
Full name of first inventor APPINO Jim Inventor's signature Date Sept. 19, 1994
Residence 4730 Cheshire Road Tel. 215-766-2550 Citizenship American

Post Office Address Doylestown, PA 18901, USA PA Inventor's signature Date Sept. 19, 1994

2-
Full name of second joint inventor, if any AIACHE Jean-Marc Inventor's signature Date Sept. 19, 1994
Residence 1, rue du Maréchal Galliéni
63000 CLERMONT-FERRAND - FRANCE FRX Citizenship French
Post Office Address

Full name of third joint inventor, if any Inventor's signature Date
Residence Citizenship
Post Office Address

Listing of Inventors Continued on Page 3 hereof yes no